



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E363988**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE #	14-02534
LOCAL AGENCY CODING	
TOTAL # OF UNITS	03
OBJECT STRUCK	MAILBOX

M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 10 - 11 - 2014	0326	31		0664
ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>				

LAKEVIEW DR	BLOCK NO. <input checked="" type="checkbox"/>	10900
MILE POST <input type="checkbox"/>		

DISTANCE	OF (REFERENCE OR CROSS STREET)
200 00 MILES <input type="checkbox"/> N <input type="checkbox"/> E <input checked="" type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/>	CEDAR RD

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PHONE D: 4258790803
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LAST NAME	BAKKER	FIRST NAME	PETER	MIDDLE INITIAL	M
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STREET NEW ADDRESS **11416 21ST PL NE**

CITY	LAKE STEVENS	ST	WA	ZIP	98258
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	BAKKEPM091DT	STATE	WA	SEX	M	D.O.B. MMDDYYYY	03	30	1991
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 3	RESTR. 9	EJECT 1	HELMET USE 2	INJURY CLASS 6	NATURE OF INJURIES NOSE BLEED
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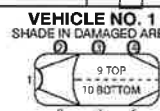
LICENSE PLATE #	AAL7174	STATE	WA	VIN#	1J4GZ58S1WC142172
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	1998	MAKE	JEEP	MODEL	GRAND	STYLE	4W	VEHICLE TOWED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TOWED BY	GOVT. VEHICLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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REGISTERED OWNER INFO. **PETER BAKKER 11416 21ST PL NE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	4Z0957647, 4Z0957647	CHARGE	DUI, HIT/RUN UNATTENDED
VEHICLE LEGALLY STANDING <input type="checkbox"/> YES <input type="checkbox"/> NO					



UNIT 02	MOTOR VEHICLE <input type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input checked="" type="checkbox"/>	DAMAGE THRESHOLD MET <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PHONE D: 4257831000
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LAST NAME	PUD	FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS **2320 CALIFORNIA ST**

CITY	EVERETT	ST	WA	ZIP	98203
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #		STATE		SEX	U	D.O.B. MMDDYYYY			
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
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LICENSE PLATE #	STATE	VIN#
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	MAKE	MODEL	STYLE	VEHICLE TOWED <input type="checkbox"/> YES <input type="checkbox"/> NO	TOWED BY	GOVT. VEHICLE <input type="checkbox"/> YES <input type="checkbox"/> NO
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REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	CHARGE
VEHICLE LEGALLY STANDING <input type="checkbox"/> YES <input type="checkbox"/> NO			



OFFICER'S NAME (PRINT)	M. HINGTGEN	BADGE OR ID #	126	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E363988**

CASE # **14-02534**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)													
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY		
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES

NARRATIVE

Veh #1 was traveling eastbound on Lakeview Dr. The passenger side tires traveled to the right of the white fog line, causing it to impact a mailbox at 10924 Lakeview Dr. Veh #1 continued eastbound and impacted a PUD pole in the area of 10928 Lakeview Dr. The impact caused a airbag deployment on both front airbags. Veh #1 then left the collision scene and drove to the registered owners address.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN

INVESTIGATING OFFICER'S SIGNATURE

10-11-14 11:03 PM

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 079

DATE

10/12/2014 9:35:51 PM

BADGE OR ID # **126**

ORI # **WA0311900**

TIME POLICE DISPATCHED **3:28 AM**

TIME POLICE ARRIVED **3:29 AM**



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E363988**

CASE # **14-02534**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐ INTRASTATE ☐

UNIT #

USDOT

ICC #

VEHICLE TYPE

CARGO BODY
TYPE

CARRIER
NAME

CARRIER
ADDRESS

CITY

ST

ZIP

NAME
SOURCE

AXLES

GVWR

PLACARD

+

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT #

3

MOTOR
VEHICLE

PEDAL-
CYCLE

PEDESTRIAN

PROPERTY
OWNER

☒

DAMAGE THRESHOLD MET
YES ☐ NO ☒

PHONE

D: 4253344959

LAST NAME

JOHNSON

FIRST NAME

JAMES

MIDDLE
INITIAL

O

STREET
NEW ADDRESS

10924 LAKEVIEW DR

CITY

LAKE STEVENS

ST

WA

ZIP

98258

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

M

D.O.B.

MMDDYYYY

07

29

1951

ON DUTY

☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

LICENSE
PLATE #

STATE

VIN#

TRAILER
PLATE #

STATE

TRAILER
PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED
YES ☐ NO ☐

TOWED BY

GOVT. VEHICLE
YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE
IN EFFECT

INSURANCE CO
& POLICY #

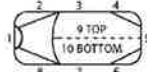
VEHICLE
LEGALLY
STANDING

YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



UNIT #

MOTOR
VEHICLE

PEDAL-
CYCLE

PEDESTRIAN

PROPERTY
OWNER

☐

DAMAGE THRESHOLD MET
YES ☐ NO ☐

PHONE

LAST NAME

FIRST NAME

MIDDLE
INITIAL

STREET
NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

D.O.B.

MMDDYYYY

ON DUTY

☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET
USE

INJURY
CLASS

NATURE OF INJURIES

LICENSE
PLATE #

STATE

VIN#

TRAILER
PLATE #

STATE

TRAILER
PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED
YES ☐ NO ☐

TOWED BY

GOVT. VEHICLE
YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE
IN EFFECT

INSURANCE CO
& POLICY #

VEHICLE
LEGALLY
STANDING

YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN

10-11-14 11:03 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST DET

DATED:

PLACE SIGNED

BADGE
OR ID #

126

ORI
#

WA0311900

APPROVED BY

SUMMERS

DATE

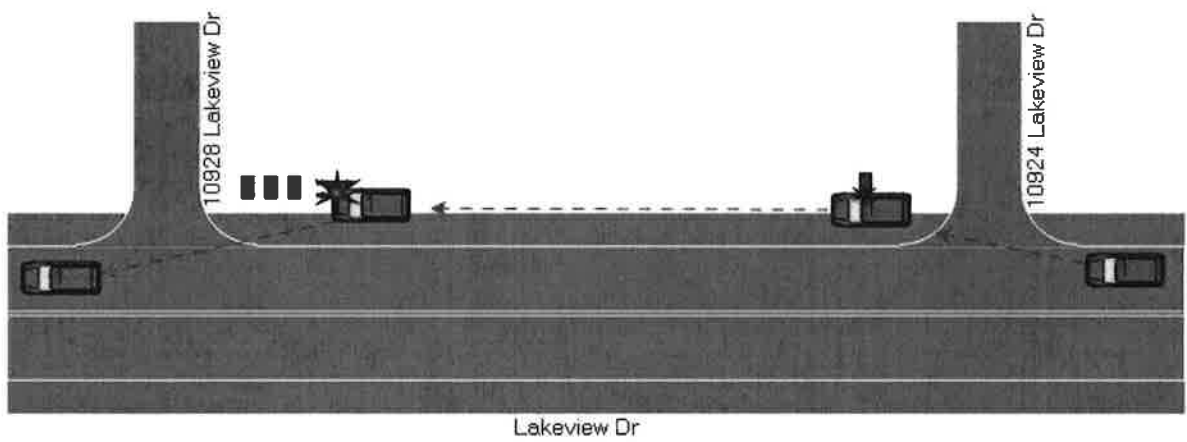
10/12/201

PAGE

3

OF

4



Not to Scale

PAGE 1 OF 1

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

Narrative:

On 10/11/14 at approximately 0328 hrs., I was dispatched to a priority collision in the area of 10928 Lakeview Dr. The reporting party, Weaver, David S (1/10/64) indicated that a hit and run had occurred in front of his home. David stated that a dark colored Jeep Cherokee impacted a pole. David said that the front bumper was still left onscene with Washington License Plate #AAL7174 affixed.

I arrived onscene at approximately 0329 hrs., and immediately noticed there was a damaged mailbox in front of 10924 Lakeview Dr. The mailbox was away from the road and there was numerous pieces of mail strewn throughout the road. The mail appeared to have come from the damaged mailbox. Approximately 25 yards east, near the front of 10928 Lakeview Dr, I noticed a severely damaged power utility pole. The pole appeared to have been impacted by something recently. There was damage consistent with impact from an eastbound vehicle. Just beyond the pole was a bank of mailboxes on a singular frame. The mailbox frame appeared to have been pushed back from the original location from the impact.

I contacted a David. He was dragging a bumper from his house. The bumper appeared consistent with a Jeep Grand Cherokee. He stated that the bumper was near the roadway and he was worried that someone would hit it, so he brought it to the front of his house. On the bumper was a WA LIC #AAL7174. A routine check on the vehicle determined that it was registered to a Bakker, Peter P (8/10/58) at 11416 21st PI NE.

About that time, Sgt. Summers began to conduct an area check for that vehicle. At approximately 0331 hrs., Sgt. Summers arrived at the registered owners address and found the vehicle and a possible driver.

A resident of 10924 Lakeview Dr came outside and began gathering the mail on the roadway. The resident provided the homeowner information as Johnson, James O (7/29/51).

I requested dispatch contact PUD in regards to assessing the damaged pole. I notified dispatch that the pole number affixed was #27. Dispatch informed me that PUD was advised.

At that time, the roadway was clear and I traveled to Sgt. Summers location. When I arrived onscene, I noticed a heavily damaged Jeep Grand Cherokee parked in the driveway of 11416 21st PI NE. The rear plate on the vehicle was WA LIC #AAL7174. There was significant damage to front passenger side fender, consistent with a recent impact. There was also damage to the rear passenger side bumper area and tail light. The interior of the vehicle also appeared consistent with a recent collision. Both airbags were deployed in the vehicle. There appeared to be blood on the driver's side airbag.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER M. Hingtgen #126	APPROVED BY 
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LSPD
ORIGINAL

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

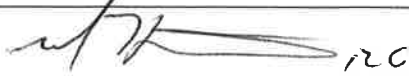

I noticed a male, sitting on the front deck of the home. The male immediately stood up on the deck. The male was later identified with a current Washington State Driver's License as Bakker, Peter M (3/30/91). Peter had blood coming from his nose. In my training and experience, this injury is consistent with a sudden and forceful impact to the nose. I immediately asked Peter if he would like to have an aid car come and evaluate his injuries. Peter said, "No, I'm fine." Peter stated that his nose bleeds easily.

Peter was wearing a black t-shirt. I immediately noticed that his t-shirt was inside-out and backwards. The printed tag, commonly found inside the rear of the t-shirt, was clearly visible in his chest area. I asked Peter what had happened with his shirt. Peter stared back at me and shrugged his shoulders. I could smell the overwhelming odor of intoxicants emitting from his breath and/or person. Peter's eyes were very red and watery. It appeared as though Peter had been crying for an extended period of time. As Peter stood in front of me, he was swaying back and forth as though he was being pushed by a stiff breeze. Peter was standing on a flat wood front deck and there was shaded from any potential wind. I asked Peter if he has gone inside the house yet. Peter stated that he has been outside the entire time. I asked him how much he had to drink tonight. Peter stared at me for approximately 10 seconds. It appeared as though he was confused by the question. I asked Peter again. Peter stated, "I'm going to plead the 5th." As Peter talked, I noticed that his speech was significantly slurred and I was having difficulties understanding him. I asked Peter where the keys for the Jeep were. Peter said, "They are in my jacket." Peter then pointed at a black in color jacket, currently laying in the front yard. The jacket appeared to have been placed there recently. The jacket was dry to the touch, while the surrounding grass yard was very wet due to continual rain throughout the evening. I asked Peter to walk out to the driveway to continue our investigation. As Peter walked to the driveway, I noticed that he was having difficulty walking in a straight line and keeping his balance from side to side. While Peter walked to the driveway, he stated that his friends kept feeding him drinks all night.

I have been trained and certified to administer the Standardized Field Sobriety Tests. These tests include the Horizontal Gaze Nystagmus, Walk and Turn, and One Leg Stand. In my training and experience, I have offered these voluntary tests in excess of 50 times.

I asked Peter if he was willing to do some voluntary Field Sobriety Tests to determine he was safe to drive the vehicle. Peter said, "I don't want to be difficult, but I don't know how to answer that." I informed him that the test was completely voluntary and it was up to him. Peter said, "Ok, I'll do it."

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME/NUMBER M. Hingtgen #126	APPROVED BY 	
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**LSPD
ORIGINAL**

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

I first asked him if had taken any kind of medication. He stated that he had taken medication for depression and a prescription mouthwash for an infection in his mouth. I asked him if he was currently under the care of a doctor or dentist. He stated both, due to his depression and a tooth infection. I asked him if he was sick or injured. He stated that he was but did not elaborate. I asked him if he walked with a limp. He looked at me and said words to the effect of, "I don't want to incriminate myself."

The first test I conducted was the Horizontal Gaze Nystagmus. I asked him if he wears any kind of corrective lenses. Peter stated that he did not but should. I placed my pen approximately 12" from his eyes and asked him to look at the top of the pen. He did so without any issues. I asked him if he could clearly see the pen. He stated that he could. I told him that I would be checking his eyes and to use his eyes and eyes only. I told him not to move his head.

I first checked for equal tracking and equal pupil size. I was able to determine that his eyes were tracking equally and his pupil size appeared to be consistent. I then checked for Lack of Smooth Pursuit. I immediately noticed a significant lack of smooth pursuit present in both eyes. I then moved into Nystagmus at Maximum Deviation. In Peter's left eye, I noticed his pupil bouncing at the corner. As the pen came back to center, Peter started moving his head from side to side. I told Peter to stop moving his head and to follow with his eyes only. Peter said he understood. I moved to check Maximum Deviation in his right eye. I was able to see Nystagmus present as soon as his pupils got to the corner. Peter's eyes then went back to center and staring straight forward. I continued to move the pen but Peter did not follow with his eyes. His eyes continued to be straight ahead. I asked Peter to continue looking at the pen. Peter stated that he could see it out of his peripheral vision. I asked Peter to look directly at the pen. Peter did not or was unable to look at the pen. I was unable to determine an Onset of Nystagmus prior to 45 Degrees due to Peter's not cooperating with the test. While observing Peter's eyes, I noticed that his pupils moved significantly as I passed the pen in front of him. At the conclusion of the test, I was able to observe 4 out of 4 tested clues.

While conducting this test, I continued to smell the odor of intoxicants emitting from his breath and/or person. I also noticed that Peter was swaying severely from side to side, throughout the test.

I then began setting Peter up to do the Walk and Turn test. Peter was moved to a straight expansion joint in the concrete driveway. I asked Peter to put his left foot on the line and his right foot directly in front of it. Peter did so momentarily and then began losing his balance. Peter then stabilized himself and regained his balance by moving his right foot out to the side. I asked Peter to get back into that position and try to stay in that position until I asked him to start. I then explained him the test and demonstrated the test for him. While I demonstrated the test,

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OFFICER NAME / NUMBER M. Hingtgen #126	APPROVED BY 
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**LSPD
ORIGINAL**

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

Peter lost his balance two more times and was unable to stay in the starting position. At the conclusion of my demonstration, I asked Peter if he understood the test. Peter stated that he did. I informed Peter that he could begin the test at any time.

Peter began walking. Peter was unable to step heel to toe on steps 1-3. Peter did not begin counting out loud until step 3. Peter then stepped to the right of his left foot on step 4. On step 6, Peter crossed over his left foot and his right foot landed to the left. On step 7, Peter nearly lost his balance as he took his step off of the line. At no point in these steps did his forward foot heel touch the toe of his rear foot. Peter continued past step 9 and continued to step 14. Peter continued to count out loud. Peter then began making small steps in a U pattern to the left. Peter spun around at the end and stood in what appeared to be a military attention stance. I asked Peter, "Are you done?" Peter said, "Yes."

I informed Peter of third test. Peter said, "I don't know if I can do that. I have horrible balance." I asked Peter if he was willing to do the test. Peter stated that he would rather not.

I asked Peter if he would be willing to do a voluntary portable breath test. Peter said, "Well I don't know. I have trouble making these decisions." I told Peter that it was completely voluntary and did not take the place of the mandatory BAC test. Peter stated that he would rather not then.

During the investigation, it was found through the totality of the circumstances that Peter appeared to be under the influence of intoxicants. At approximately 0356 hrs., I informed Peter that he was under arrest for D.U.I. I placed Peter in handcuffs and searched him incident to his arrest. At the conclusion of the search, I placed Peter in the rear seat of my patrol vehicle. I then read Peter his Miranda Rights from a standard issued card. I asked Peter if he understood his rights. Peter said, "Yes, Officer." I asked Peter with those rights in mind if he would like to continue discussing the incident. Peter said, "I really shouldn't." I informed Peter that we would be enroute to the police department to complete the BAC portion of the DUI investigation. Peter stated that he need his jacket if we were going. I secured Peter's jacket from the yard. Inside the jacket was Peter's wallet with his valid WSDL. Also inside the same pocket was a set of keys. The key read "Jeep" on the handle portion. I placed the key in the ignition of the vehicle and confirmed that it operated the Grand Cherokee.

Ofc. Planalp remained onscene to assist with completing the impound of the vehicle. Speedway Towing was dispatched to complete the impound.

At approximately 0404 hrs., I began transporting Peter to the Lake Stevens PD, 2211 Grade Rd. While transporting Peter to the police department, Peter kept asking to do a blood draw because

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OFFICER NAME / NUMBER M. Hingtgen #126	APPROVED BY 
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ORIGINAL**

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

he was confused of how alcohol could be on his breath. Peter said that I was unable to get an accurate reading using breath. I informed him that at this time we were going to proceed with the BAC.

I arrived onscene at approximately 0407 hrs. I immediately walked Peter into the BAC room at in the PD. I released Peter from his restrains and was sat on a wooden bench, next to the BAC Datamaster. I secured a clean paper towel with water on it and provided it to Peter to wipe away any blood from his nose and mouth area. Peter did so without incident. I checked Peters's mouth and confirmed the time of 0410 hrs, according to the BAC Datamaster. I then was then began my 15 minute observation time. I checked to confirm the BAC Datamaster was operating properly as well.

I then started completing the DUI Arrest Report packet. I started by reading Peter his Constitutional Rights. I read these rights, verbatim, from page 2 of the DUI Arrest Report packet. At the conclusion of reciting his rights, Peter was asked if he had his rights read to him. Peter stated that he did and provided his signature on the line provided in the report. I then asked read Peter the section regarding exercising his rights. At the conclusion of reading the statement, Peter started crying uncontrollably. I asked him if he understood. Peter stated that he did but was not able to provide his signature.

I moved to page 3 in regards to Implied Consent Warning for Breath. I read Peter the Implied Consent Warning, verbatim, directly from the DUI Arrest Report. At the conclusion of reading the page to him, I asked him if he agreed that he had read or have had read to him the statements. Peter stated that he was confused. I asked him what part he was confused about. Peter began crying and stated that he had difficulty with difficult decisions. Peter requested that I read him the Implied Consent Warning again. I recited the Warning from page 3 for Peter again, verbatim. I asked Peter if he would agree that he had the statement read to him. Peter agreed and provided his signature. I then asked Peter if he was willing to provide a breath sample. Peter stated that he would.

Due to Peter continually stating that he was not willing to provide answers to questions, I did not continue with asking the question on page 4 of the DUI Arrest Report.

At 0426 hrs., I began the BAC test. During my observation period, Peter dried his nose several times but at no point did he touch his mouth or place anything near his mouth. I began inputting the required information into the BAC Datamaster. While inputting the data, the BAC Datamaster requested the drinking location. I asked Peter if he was willing to tell me where he was drinking at. Peter refused to answer. At the conclusion of the documentation, I again asked Peter if he was willing to provide a breath sample. Peter again stated that he was. Peter then

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OFFICER NAME / NUMBER M. Hingtgen #126 	APPROVED BY 
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**LSPD
ORIGINAL**

ADDITIONAL NARRATIVE

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Hit and Run Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Johnson, James O (2/29/51)/Public Utility District		

provided two separate samples of his breath. At the conclusion of the test, the printed sheet indicated that his first breath sample at 0430 hrs was a .171 BrAC and his second sample at 0434 hrs was .183 BrAC. I asked Peter what he believed was the legal limit involving alcohol was in the state of Washington. Peter stated that he did not know. I informed him that the legal limit to drive after consuming alcohol was .08. I then informed Peter what his results were. Peter did not respond. I provided Peter a copy of the printout.

I provided Peter with his Drivers Hearing Request Information. Peter then provided his signature indicating that he received it on page 1 of the DUI Arrest report. Peter was provided with a ride home at the conclusion of the investigation.

I completed Criminal Citation #4Z0957647 for DUI and Hit and Run. I requested that it be court serviced through Marysville Municipal Court.

Attachments:

Criminal Citation #4Z0957647
 DUI Arrest Report
 BAC Datamaster Printout
 Impound form
 Collision Report

Recommendations:

Forward to City Prosecutors Office

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER M. Hingtgen #126 	APPROVED BY 
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**LSPD
ORIGINAL**

FOLLOW-UP REPORT

<small>AGENCY NAME</small> LAKE STEVENS POLICE DEPARTMENT	<small>INCIDENT CLASSIFICATION</small> DUI	<small>INCIDENT NUMBER</small> 14-02534
<small>NAME OF VICTIM(S)</small>		

On 10-11-14 at 0328 hours I went to assist Officer Hingtgen with a priority Collision that just occurred at 10928 Lakeview Drive in the city of Lake Stevens. The reporting party gave information of a dark Jeep Cherokee just hit a pole, left a bumper and a license of AAL7174. That plate returned to a nearby address of 11416 21st PI NE also in the city of Lake Stevens. Officer Hingtgen went to the Collision scene and I did an area check for the vehicle.

At 0331 hours I went to the 11416 21st PI NE address and saw a black or green Jeep Cherokee in the residence driveway. Standing next to the vehicle was a white male in his early twenties standing in the front yard staring at the vehicle. I exited my vehicle and saw the male was bleeding from the nose and he also had blood on his pants. The male's eyes were bloodshot and watery as I approached him. I looked at the vehicle bearing Washington license AAL7174 and saw extensive damage. The vehicle had a flat front tire and the front hood was buckled from a right front passenger side impact. The right side of the vehicle also showed a large scrape pattern from the front to the rear. Both driver and passenger side airbags were deployed. There were no keys in the ignition. The driver's side airbag had blood all over it as well on the center console. Both the males' hands were covered in blood. I asked the male if he required or wanted aid and he refused. The male asked if he could go in and talk to his parents and I told him to have a seat on the front porch. As this male spoke he slurred his words and appeared to have some trouble speaking clearly. I asked him for his name and he identified himself as Peter M. Bakker DOB 03-30-91. I then asked for additional units.

Officers Hingtgen and Planalp arrived as I was taking pictures. I did not interview Bakker any further. Officer Hingtgen took over the investigation and Officer Planalp did the impound inventory turning over the vehicle to Speedway Towing.

I cleared the scene at 0446 hours.

**LSPD
ORIGINAL**

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

<small>OFFICER NAME / NUMBER</small> Sgt. R. Summers #79	<small>APPROVED BY</small> 
--	--

FOLLOW-UP REPORT

AGENCY NAME LAKE STEVENS POLICE DEPARTMENT	INCIDENT CLASSIFICATION DUI/Vehicle Collision	INCIDENT NUMBER 14-02534
NAME OF VICTIM(S) Snohomish County PUD		

On 10/11/14 at about 0328 hours, Officer Hingtgen and Sgt. Summers were dispatched to a priority collision at 10928 Lakeview DR, in the City of Lake Stevens. SNOPAC advised that about 3 minutes ago there was a hit and run involving a dark Jeep Cherokee VS a pole. SNOPAC advised that the suspect vehicle left its bumper which had an attached Washington State license plate of AAL7174.

At about 0335 hours, Sgt. Summers requested that I come to his location at 11416 21st PL NE. At about 0344 hours, I arrived onscene. When I arrived I observed Officer Hingtgen talking to male in the driveway. The male was wearing a black shirt, white pants and black boots. I could see what appeared to be blood on the males face. While walking up to Officer Hingtgen, I heard him ask the male who was identified as Peter Bakker if he wanted an AID car and Peter said no with slurred speech.

I also observed the vehicle that was involved in the collision WA plate AAL7174 parked in the driveway. When I looked at the vehicle I observed that the passenger side of the vehicle was damaged and the front passenger side was extremely damaged with what looked like pieces of a telephone pole stuck in it. While standing outside the vehicle I noticed that the deployed driver air bag had blood on it and the deployed passenger airbag did not have blood on it.

While Officer Hingtgen was giving Peter the Standardized Field Soberly Test instructions, I observed that Peter could not stand still. I observed that Peter was swaying back and forth and side to side. When Officer Hingtgen was performing the HGN test on Peter, Peter was having trouble following Officer Hingtgen's stimulus without moving his head. I also observed that Peter was swaying back and forth and side to side.

When Officer Hingtgen was giving Peter the instructions to the walk and turn test, I observed that Peter could not stand in the position he was asked and that he was almost falling over. When Peter was performing the walk and turn test, I observed that Peter was not walking heel to toe. I also observed that when Peter performed his turn, he took a wide turn to his left and then turned around 180 degrees and stopped. Peter only performed the first portion of the walk and turn test.

After Officer Hingtgen placed Peter under arrest for DUI, I filled out the impound paperwork for Officer Hingtgen. Speedway Towing arrived onscene at about 0430 hours.

I cleared the call at 0446 hours.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER D.PLANALP #102	APPROVED BY 
--	---

**LSPD
ORIGINAL**

 *** FAX TX REPORT ***

TRANSMISSION OK

JOB NO.	2528
DESTINATION ADDRESS	914254073968
SUBADDRESS	
DESTINATION ID	SnoPac
ST. TIME	10/11 05:09
TX/RX TIME	00' 35
PGS.	2
RESULT	OK

LAKE STEVENS POLICE DEPARTMENT

FAX COVER SHEET

Randy W. Celori Chief of Police
2211 Grade Road
Lake Stevens WA 98258
Phone 425-334-9537 Fax 425-334-9842



TO:	SNOPAC	FAX:	
FROM:	PLANALP 102	DATE:	10-11-14
CC:		PAGES:	2
RE:	Impound		

☐ WHEN THIS BOX IS CHECKED, THE FOLLOWING IS **CONFIDENTIAL POLICE INFORMATION** AND MAY NOT BE DISSEMINATED.

LSPD
ORIGIN

LSPD
ORIGINAL

NO. 020

UNAUTHORIZED VEHICLE IMPOUNDMENT REPORT

To:

Records Unit

Fax: 425 388 3885

Telephone: 425 388 3523

From:

NAME OF TOW COMPANY

Ron May Towing

5720

2406 - 39th St.

STREET ADDRESS

425-259-0240

FAX

TELEPHONE

425-259-9264

AUTHORIZED AGENT SIGNATURE

BUSINESS TAX ACCOUNT NUMBER

LIC 895-ZMR LST WA LTR

VIN 1B4GP44R4TB484609

MAKE Dodge MODEL caravan YEAR 96 COLOR silver 1 BDYSTY 4 door

IMP. FROM (ADDRESS) 82nd Dr NE 3 83rd Ave NE CITY LK Stevens

MISC

DATE OF IMPOUND 10-11-14

TIME OF IMPOUND 2:50

NOT IN SCSO JURISDICTION

JURISDICTION

ONLY VEHICLES PRIVATELY IMPOUNDED FROM UNINCORPORATED SNOHOMISH COUNTY ARE TO BE REPORTED TO THIS FORM.

VEHICLES PRIVATELY IMPOUNDED FROM INCORPORATED AREAS OF SNOHOMISH COUNTY ARE TO BE REPORTED TO THE POLICE DEPARTMENT HAVING JURISDICTION OR TO THE POLICE DEPARTMENT'S DISPATCH CENTER.

FAXING THIS FORM TO THE SNOHOMISH COUNTY SHERIFF AT THE TIME OF IMPOUNDMENT WILL MEET THE REQUIREMENTS OF IMMEDIATE NOTIFICATION TO LAW ENFORCEMENT AGENCY HAVING JURISDICTION. REQUEST FOR REGISTRATION AND SUBSEQUENT WRITTEN NOTICE WITHIN 24 HOURS SPECIFIED IN RCW 46.55.100. YOUR NOTIFICATION FORM WILL BE FAXED BACK TO YOU CONTAINING INFORMATION.

IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound X

Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):

(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)

Case Number: 1A-02534Reason: DUI

MKE/ (Circle One)

(EVI)

EVIP

EVR

ORI/ WA031 1900LIC/ AAL 7174LIS/ WALIY/ 2015LIT/ PCVIN/ 1J4G258S1WC142172VYR/ 1998VMA/ JeepVMO/ CHKVST/ LLVCO/ GRYDATE OF IMPOUND/REPO: 10/11/2014TOW COMPANY NAME: Speedway towingTOW COMPANY OCA/ **5348PHONE #: 360-563-5830

**(For Repossession Company with no DOL issued OCA, use 5999)

Address Taken From: 11410 21 PL NECity of Jurisdiction: Lake Stevens

For Repo:

Financial Institution: X

Contact Person: _____

Phone #: _____

For Teletype:

Date: 10/11/2014Entered By: 38WAC #: 141014530

Checked By: _____

Checked Date: _____

LSPD
ORIGINAL

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 09.50.005
☐ IMPOUND ONLY
☒ DWI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH ___ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER
☐ REGISTERED OWNER MAY REDEEM
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER, REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE
TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

14-02534

VEHICLE INFORMATION

VIN 1J51GZ58S1W6142172				
LICENSE AAL774	STATE WA	YEAR 1998	MAKE JEEP	MODEL JPC-H
MILEAGE <input type="checkbox"/> Report of Sale <input type="checkbox"/> Digital		STYLE SUV	COLOR GRAY	

DRIVER

NAME (LAST, FIRST, MI) BAKKE PETER M.
STREET ADDRESS 11416 21 PL NE
CITY, STATE, ZIP CODE LAKE STEVENS WA 98258
PHONE 0330-91

REGISTERED OWNER

NAME (LAST, FI ST, MI) BAKKE P, PETER P.
STREET ADDRESS 11416 21 PL NE
CITY, STATE, ZIP CODE LAKE STEVENS, WA 98258
PHONE

LEGAL OWNER

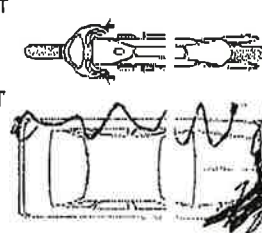
NAME (LAST, FIRST, MI) SAME AS RO
STREET ADDRESS
CITY, STATE, ZIP CODE
PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10-11-14 AT 0400 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE SPEEDWAY TOWING TO REMOVE THIS VEHICLE FROM 11416 21 PL NE LAKE STEVENS, WA (TOWING FIRM)

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE [Signature] DOL TOW TRUCK NO. 574802 DATE 10-11-14

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED <input checked="" type="checkbox"/> KEYS [1] <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> AUDIO TAPES / CD'S [] <input type="checkbox"/> CB RADIO <input type="checkbox"/> RADAR DETECTOR <input type="checkbox"/> TRUNK LOCKED <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER	<input type="checkbox"/> FRONT <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER 		
INVENTORY/EVIDENCE		NARRATIVE OR DIAGRAM (List reason(s) for impound.) DRIVER ARRESTED FOR DWI AFTER COLLISION	

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE [Signature] SNOHOMI-SH COUNTY, WA BADGE NO. 102

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE [Signature] SUPERVISOR

LAKE STEVENS POLICE DEPARTMENT

FAX COVER SHEET

Randy W. Celori Chief of Police

2211 Grade Road

Lake Stevens WA 98258

Phone 425-334-9537 Fax 425-334-9842



TO:	DOL —	FAX:	360 570-7026
FROM:	LSPD	DATE:	10-12-14
CC:		PAGES:	8
RE:	14-02534		

☐

WHEN THIS BOX IS CHECKED, THE FOLLOWING IS **CONFIDENTIAL POLICE INFORMATION** AND MAY NOT BE DISSEMINATED.

DUI ARREST RPT

**** If you have received this fax in error please notify the sender and destroy this document ****

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

WASHINGTON STATE
DUI ARREST REPORT
REPORT OF BREATH / BLOOD TEST FOR ALCOHOL OR
REFUSAL TO SUBMIT TO BREATH TEST FOR ALCOHOL AND DRUGS

SUBJECT'S NAME (LAST, FIRST, MI) BAKKER, PETER M		SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	DATE OF BIRTH 3/30/91	DATE / TIME OF ARREST 10/11/14 / 0356
STREET ADDRESS 11416 21ST PL NE		CITY / STATE / ZIP CODE LAKE STEVENS / WA / 98258		
DRIVER'S LICENSE NUMBER BAKKEPM091DT	CDL ENDORSED? (CHECK IF YES) <input type="checkbox"/>	STATE WA	COUNTY OF ARREST SNOHOMISH	CASE / CITATION NUMBER 14-02534 / 42 8957647

BAC Readings: 1st Sample **.171** 2nd Sample **.183** Refused Test _____

The subject was lawfully arrested. At that time, there were reasonable grounds to believe that the arrested person had been driving or was in actual physical control of a motor vehicle within this state while under the influence of intoxicating liquor or drugs, or both, or was under the age of twenty-one years and had been driving or was in actual physical control of a motor vehicle while having an alcohol concentration in violation of RCW 46.61.503.

Check those that apply:

- ☒ A breath test was administered after providing the warnings required by subsection (2) of RCW 46.20.308, AND the results indicate the arrested person's alcohol concentration was 0.08 or more if the arrested person's age is twenty-one or over, OR was in violation of RCW 46.61.502, 46.61.503, or 46.61.504 if the arrested person is under the age of twenty-one.
- ☐ The arrested person refused to submit to a test of his/her breath after receipt of the warnings required by subsection (2) of RCW 46.20.308.
- ☐ **FELONY/UNCONSCIOUSNESS:** The blood or breath test was administered pursuant to a search warrant, a valid waiver of the warrant requirement or exigent circumstances AND the arrested person was unconscious or I had probable cause to believe a felony DUI, felony physical control of a motor vehicle while DUI, vehicular homicide, vehicular assault or an arrest for DUI resulting from a collision in which there has been serious bodily injury to another person pursuant to RCW 46.20.308(3) was committed by the arrested person.

☒ **Driver's Hearing Request Information was given to the arrested person.**

Notice of Right to Hearing: I have been given written notice of my right to a hearing, including the steps required to obtain a hearing, and understand that the notice of suspension, revocation, or denial of license will be mailed to the address of record on file with the Department of Licensing.

SIGNATURE OF DRIVER

DATE

Complete this box ONLY if the arrested person was driving a commercial motor vehicle as defined in Chapter 46.25 RCW at the time of the incident.

☐ Operating a Vehicle Requiring a Commercial Driver's License BAC Readings: 1st Reading _____ 2nd Reading _____ Refused Test _____


There was probable cause to believe that the arrested person was driving or was in actual physical control of a vehicle requiring a commercial driver's license within this state while having alcohol/drugs in his/her system and that a test of his/her breath and/or blood disclosed an alcohol concentration of 0.04 or more. OR

There was probable cause to believe that the arrested person was driving or was in actual physical control of a vehicle requiring a commercial driver's license within this state while having alcohol/drugs in his/her system. The arrested person was requested to take a breath/blood test and informed of the consequences of refusal and his/her rights under Chapter 46.25 RCW. The arrested person then refused to submit to the requested test. Chapter 46.25 RCW

VEH YEAR	MAKE	MODEL	LICENSE PLATE NUMBER	STATE	HAZARDOUS MATERIAL? <input type="checkbox"/> YES <input type="checkbox"/> NO
----------	------	-------	----------------------	-------	--

NOTE: If applicable, sign and date this page after toxicology report is received.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing and the accompanying reports/copies of documents and the information contained therein are true, correct, and accurate. (RCW 9A.72.085.)

LAW ENFORCEMENT AGENCY LAKE STEVENS POLICE DEPT	ORI NO. (9 digits) 031001900	OFFICER'S SIGNATURE 	DATE SIGNED 10/11/14
MAILING ADDRESS 2211 GRADE RD	PRINTED NAME OF OFFICER M. HINGTGEN		BADGE NUMBER 126
CITY LAKE STEVENS	STATE WA	ZIP 98258	PLACE SIGNED (city / county / state) LAKE STEVENS / SNOHOMISH / WA
OFFICER'S E-MAIL ADDRESS M.HINGTGEN@LAKESTEVENS.WA.GOV			CONTACT PHONE NUMBER FOR HEARING (include area code) (425) 334-9537

OFFICERS: Fax or e-mail completed report, breath test document, and supplemental reports to:

Department of Licensing
Driver Records
SwornReports@DOL.WA.GOV
Fax: (360) 570-7026

Number of pages faxed _____

USE THIS PAGE AS COVER SHEET

WASHINGTON STATE
DUI ARREST REPORT

CASE / CITATION NUMBER

14-02534 / 420957647

☒ On the date, time and location of this arrest, I had authority to arrest pursuant to my agency's jurisdiction or RCW 10.93

CONSTITUTIONAL RIGHTS

1. YOU HAVE THE RIGHT TO REMAIN SILENT.
2. YOU HAVE THE RIGHT AT THIS TIME TO AN ATTORNEY.
3. ANYTHING YOU SAY CAN AND WILL BE USED AGAINST YOU IN A COURT OF LAW.
4. IF YOU ARE UNDER THE AGE OF 18, ANYTHING YOU SAY CAN BE USED AGAINST YOU IN A JUVENILE COURT PROSECUTION FOR A JUVENILE OFFENSE AND CAN ALSO BE USED AGAINST YOU IN AN ADULT COURT CRIMINAL PROSECUTION IF THE JUVENILE COURT DECIDES THAT YOU ARE TO BE TRIED AS AN ADULT.
5. YOU HAVE THE RIGHT TO TALK TO AN ATTORNEY BEFORE ANSWERING ANY QUESTIONS.
6. YOU HAVE THE RIGHT TO HAVE AN ATTORNEY PRESENT DURING THE QUESTIONING.
7. IF YOU CANNOT AFFORD AN ATTORNEY, ONE WILL BE APPOINTED FOR YOU WITHOUT COST IF YOU SO DESIRE.
8. YOU CAN EXERCISE THESE RIGHTS AT ANY TIME.
9. DO YOU UNDERSTAND THESE RIGHTS?

I HAVE READ OR HAVE HAD READ TO ME THE ABOVE EXPLANATION OF MY CONSTITUTIONAL RIGHTS AND I UNDERSTAND THESE RIGHTS.

SUBJECT'S SIGNATURE

PMB

I UNDERSTAND MY CONSTITUTIONAL RIGHTS. I HAVE DECIDED NOT TO EXERCISE THESE RIGHTS AT THIS TIME. ANY STATEMENTS MADE BY ME ARE MADE FREELY, VOLUNTARILY, AND WITHOUT THREATS OR PROMISES OF ANY KIND.

OFFICER'S SIGNATURE

[Signature] 126

SUBJECT'S SIGNATURE

REFUSED TO SIGN

DATE / TIME

10/11/14 0413 HRS

LOCATION(s)

LAWR STEVENS PD

☒ Constitutional rights (Miranda) were read in the field at 0358 hours from the department issued rights card.

ATTORNEY REQUESTED

☐ YES ☒ NO

ATTORNEY CONTACTED? TIME:

☐ YES ☐ NO ☐ UNABLE

ATTORNEY'S NAME

ATTORNEY'S PHONE NO.

EXPLANATION:

WASHINGTON STATE
DUI ARREST REPORT

CASE / CITATION NUMBER

14-02534 / 420957647

IMPLIED CONSENT WARNING FOR BREATH

WARNING! YOU ARE UNDER ARREST FOR:

(check appropriate box(es))

- ☒ RCW 46.61.502 OR RCW 46.61.504: Driving or being in actual physical control of a motor vehicle while under the influence of intoxicating liquor and/or drugs.
- ☐ RCW 46.61.503: Being under 21 years of age and driving or being in actual physical control of a motor vehicle after consuming alcohol or marijuana.
- ☐ RCW 46.25.110: Driving a commercial motor vehicle while having alcohol or THC in your system.

FURTHER, YOU ARE NOW BEING ASKED TO SUBMIT TO A TEST OF YOUR BREATH WHICH CONSISTS OF TWO SEPARATE SAMPLES OF YOUR BREATH, TAKEN INDEPENDENTLY, TO DETERMINE ALCOHOL CONCENTRATION.

- YOU ARE NOW ADVISED THAT YOU HAVE THE RIGHT TO REFUSE THIS BREATH TEST; AND THAT IF YOU REFUSE:
 - YOUR DRIVER'S LICENSE, PERMIT, OR PRIVILEGE TO DRIVE WILL BE REVOKED OR DENIED BY THE DEPARTMENT OF LICENSING FOR AT LEAST ONE YEAR; AND
 - YOUR REFUSAL TO SUBMIT TO THIS TEST MAY BE USED IN A CRIMINAL TRIAL.
- YOU ARE FURTHER ADVISED THAT IF YOU SUBMIT TO THIS BREATH TEST, AND THE TEST IS ADMINISTERED, YOUR DRIVER'S LICENSE, PERMIT, OR PRIVILEGE TO DRIVE WILL BE SUSPENDED, REVOKED, OR DENIED BY THE DEPARTMENT OF LICENSING FOR AT LEAST NINETY DAYS IF YOU ARE:
 - AGE TWENTY-ONE OR OVER AND THE TEST INDICATES THE ALCOHOL CONCENTRATION OF YOUR BREATH IS 0.08 OR MORE, OR THE TEST INDICATES THE THC CONCENTRATION OF YOUR BLOOD IS 5.00 OR MORE, OR YOU ARE IN VIOLATION OF RCW 46.61.502, DRIVING UNDER THE INFLUENCE, OR RCW 46.61.504, PHYSICAL CONTROL OF A VEHICLE UNDER THE INFLUENCE;
 - OR
 - UNDER AGE TWENTY-ONE AND THE TEST INDICATES THE ALCOHOL CONCENTRATION OF YOUR BREATH IS 0.02 OR MORE, OR THE TEST INDICATES THE THC CONCENTRATION OF YOUR BLOOD IS ABOVE 0.00, OR YOU ARE IN VIOLATION OF RCW 46.61.502, DRIVING UNDER THE INFLUENCE, OR RCW 46.61.504, PHYSICAL CONTROL OF A VEHICLE UNDER THE INFLUENCE.

THE BREATH TEST INSTRUMENT WILL NOT TEST FOR THC CONCENTRATION IN A BREATH SAMPLE.
- IF YOUR DRIVER'S LICENSE, PERMIT, OR PRIVILEGE TO DRIVE IS SUSPENDED, REVOKED, OR DENIED, YOU MAY BE ELIGIBLE TO IMMEDIATELY APPLY FOR AN IGNITION INTERLOCK DRIVER'S LICENSE.
- YOU HAVE THE RIGHT TO ADDITIONAL TESTS ADMINISTERED BY ANY QUALIFIED PERSON OF YOUR OWN CHOOSING.

FOR THOSE NOT DRIVING A COMMERCIAL MOTOR VEHICLE AT THE TIME OF ARREST: IF YOUR DRIVER'S LICENSE IS SUSPENDED OR REVOKED, YOUR COMMERCIAL DRIVER'S LICENSE, IF ANY, WILL BE DISQUALIFIED.

FOR THOSE DRIVING A COMMERCIAL MOTOR VEHICLE AT THE TIME OF ARREST: IF YOU EITHER (A) REFUSE THIS TEST OR (B) SUBMIT TO THIS TEST AND THE TEST INDICATES AN ALCOHOL CONCENTRATION OF 0.04 OR MORE, OR ANY MEASURABLE AMOUNT OF THC CONCENTRATION, YOU WILL BE DISQUALIFIED BY THE DEPARTMENT OF LICENSING FROM DRIVING A COMMERCIAL MOTOR VEHICLE.

I HAVE READ THE ABOVE STATEMENT TO THE SUBJECT

I HAVE READ OR HAVE HAD READ TO ME THE ABOVE STATEMENT(S).

OFFICER'S SIGNATURE

SUBJECT'S SIGNATURE

10/11/14 @ 0432

LAKE STEVENS PD

WILL YOU NOW SUBMIT TO A BREATH TEST?

☒ YES ☐ NO

Did subject express any confusion regarding the implied consent warnings? If yes, explain below.

☐ YES ☒ NO

<input checked="" type="checkbox"/> At the time of this test(s), I was certified to operate the BAC DATAMASTER and the BAC DATAMASTER CDM and possessed a valid permit issued by the State Toxicologist.			
<input type="checkbox"/> At the time of this test(s), I was certified to operate the DRAEGER ALCOTEST 9510 and possessed a valid permit issued by the State Toxicologist.			
DO YOU HAVE ANY FOREIGN SUBSTANCE IN YOUR MOUTH?	MOUTH CHECKED? TIME? 0410	2 ND MOUTH CHECK? (If Necessary) TIME?	ANY FOREIGN SUBSTANCES FOUND? EXPLAIN:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	REMOVED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<input checked="" type="checkbox"/> I observed the subject from the time of the mouth check through the completion of the breath test.			
<input checked="" type="checkbox"/> The subject did not vomit, eat, drink, smoke, or place any foreign substance in his/her mouth during the observation time.			
<input checked="" type="checkbox"/> At the time of this test, I possessed a valid permit issued by the State Toxicologist and was certified to operate the PBT. The test was performed in accordance with the State Toxicologist's protocols. (Chapter 448-15 WAC)		PBT READING	PBT TIME
<input type="checkbox"/> BOOKED <input type="checkbox"/> RELEASED TO:			
<input checked="" type="checkbox"/> PR'D			

WASHINGTON STATE
DUI ARREST REPORT
DUI INTERVIEW

CASE / CITATION NUMBER

14-02534 / 426957647

1. DO YOU HAVE ANY PHYSICAL IMPAIRMENTS? EXPLAIN: <input type="checkbox"/> YES <input type="checkbox"/> NO		13. ANYTHING MECHANICALLY WRONG WITH THE VEHICLE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
2. DO YOU LIMP? <input type="checkbox"/> YES <input type="checkbox"/> NO		14. HAVE YOU BEEN INJURED OR INVOLVED IN ANY COLLISION(S) IN THE PAST 24 HOURS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
3. ARE YOU SICK / INJURED? EXPLAIN: <input type="checkbox"/> YES <input type="checkbox"/> NO		15. HAVE YOU HAD ANY ALCOHOL TO DRINK SINCE BEING STOPPED / THE COLLISION? <input type="checkbox"/> YES <input type="checkbox"/> NO	
4. UNDER CARE OF A DOCTOR OR DENTIST? <input type="checkbox"/> YES <input type="checkbox"/> NO		15A. WHAT?	15B. HOW MUCH?
5. ARE YOU DIABETIC / EPILEPTIC? <input type="checkbox"/> YES <input type="checkbox"/> NO		16. TIME COLLISION OCCURRED?	
6. DO YOU TAKE INSULIN? <input type="checkbox"/> YES <input type="checkbox"/> NO		17. WHERE WERE YOU GOING BEFORE STOPPED / THE COLLISION?	
7. HAVE YOU TAKEN ANY MEDICINES/DRUGS IN THE PAST 24 HOURS? <input type="checkbox"/> YES <input type="checkbox"/> NO		18. WITHOUT LOOKING, WHAT TIME DO YOU THINK IT IS? (ACTUAL TIME)	
7A. PRESCRIPTION? <input type="checkbox"/> YES <input type="checkbox"/> NO		19. WHAT STREET / HIGHWAY WERE YOU ON?	
7B. NON-PRESCRIPTION? <input type="checkbox"/> YES <input type="checkbox"/> NO		20. DIRECTION OF TRAVEL?	
7C. LAST DOSE?		21. STARTED FROM?	
7D. QUANTITY?		22. TIME STARTED?	
7E. COCAINE? <input type="checkbox"/> YES <input type="checkbox"/> NO		23. DAY OF THE WEEK? <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
MARIJUANA? <input type="checkbox"/> YES <input type="checkbox"/> NO		24. WHAT CITY / COUNTY ARE YOU IN NOW?	
OTHER? <input type="checkbox"/> YES <input type="checkbox"/> NO		25. WHAT IS THE DATE?	
8. DO YOU HAVE IMPAIRED VISION? <input type="checkbox"/> YES <input type="checkbox"/> NO		26. HAVE YOU BEEN DRINKING ALCOHOLIC BEVERAGES? <input type="checkbox"/> YES <input type="checkbox"/> NO	
8A. DO YOU WEAR CORRECTIVE LENSES? <input type="checkbox"/> YES <input type="checkbox"/> NO		26A. WHAT HAVE YOU BEEN DRINKING?	
8B. WERE YOU WEARING THEM WHEN YOU WERE STOPPED / BEFORE COLLISION? <input type="checkbox"/> YES <input type="checkbox"/> NO		26B. HOW MUCH?	
9. WHERE DO YOU WORK?		26C. WHEN DID YOU START?	
9A. DID YOU WORK TODAY?		27. WHO HAVE YOU BEEN DRINKING WITH?	
10. TIME YOU GOT OFF WORK?		28. WHERE WERE YOU DRINKING?	
11. HOURS OF SLEEP LAST NIGHT?		29. TIME OF LAST DRINK?	
12. WERE YOU DRIVING THE VEHICLE? <input type="checkbox"/> YES <input type="checkbox"/> NO		30. DO YOU BELIEVE YOUR ABILITY TO DRIVE WAS AFFECTED BY YOUR ALCOHOL AND/OR DRUG USAGE?	
31. HAVE YOU EVER BEEN ARRESTED FOR DUI BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, HOW MANY TIMES?			

If drug use indicated, please contact WSP Communications or local DRE after breath test and continue with DUI process.

PRE-ARREST OBSERVATIONS

1. ATTITUDE <input type="checkbox"/> COOPERATIVE <input type="checkbox"/> MOOD SWINGS <input type="checkbox"/> ARGUMENTATIVE <input type="checkbox"/> CRYING <input type="checkbox"/> LAUGHING <input type="checkbox"/> OTHER:	2. COORDINATION <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> FUMBLER FOR DRIVER'S LICENSE <input type="checkbox"/> OTHER:	3. CLOTHES <input type="checkbox"/> ORDERLY <input type="checkbox"/> SOILED - EXPLAIN <input type="checkbox"/> OTHER: EXPLAIN <input type="checkbox"/> SHOES (Describe)	4. EYES <input type="checkbox"/> NORMAL <input type="checkbox"/> WATERY <input type="checkbox"/> DROOPY <input type="checkbox"/> BLOODSHOT <input type="checkbox"/> PUPILS DILATED <input type="checkbox"/> PUPILS CONSTRICTED <input type="checkbox"/> OTHER:	5. FACIAL COLOR <input type="checkbox"/> NORMAL <input type="checkbox"/> FLUSHED <input type="checkbox"/> PALE <input type="checkbox"/> OTHER:	6. ODOR OF INTOXICANTS ON BREATH <input type="checkbox"/> NONE <input type="checkbox"/> FAINT <input type="checkbox"/> MEDIUM <input type="checkbox"/> STRONG <input type="checkbox"/> OBVIOUS <input type="checkbox"/> OTHER:	7. SPEECH <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> REPETITIVE <input type="checkbox"/> FAST <input type="checkbox"/> SLURRED <input type="checkbox"/> OTHER:
8. OFFICER'S OPINION (of subject's impairment due to use of alcohol/drugs) <input type="checkbox"/> SLIGHT <input type="checkbox"/> OBVIOUS <input type="checkbox"/> EXTREME		9. SUBJECT'S NATIVE LANGUAGE <input type="checkbox"/> ENGLISH <input type="checkbox"/> OTHER		9A. SUBJECT APPEARED TO UNDERSTAND INSTRUCTIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
9B. INTERPRETER REQUESTED? EXPLAIN BELOW: <input type="checkbox"/> YES <input type="checkbox"/> NO TIME:			INTERPRETER PROVIDED			
10. PASSENGER(S) INFORMATION						

WASHINGTON STATE
DUI ARREST REPORT
SOBRIETY TESTS

CASE / CITATION NUMBER

14-02534 / 420957647

SURFACE <input type="checkbox"/> PAVED <input type="checkbox"/> GRAVEL <input type="checkbox"/> DIRT <input type="checkbox"/> GRASS <input type="checkbox"/> OTHER				GRADE <input type="checkbox"/> LEVEL <input type="checkbox"/> SLIGHT GRADE <input type="checkbox"/> MODERATE GRADE <input type="checkbox"/> OTHER			LIGHTING <input type="checkbox"/> DAYLIGHT <input type="checkbox"/> DARK <input type="checkbox"/> STREET LIGHT <input type="checkbox"/> OTHER	
---	--	--	--	--	--	--	--	--

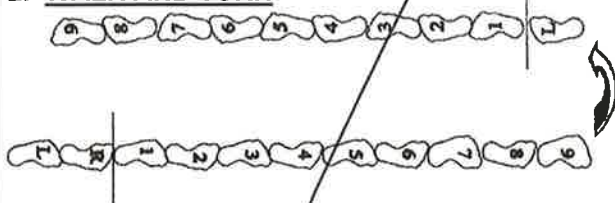
1. HORIZONTAL GAZE NYSTAGMUS (HGN)

☐ I have been trained in the administration of HGN testing and performed the test in accordance with this training.

EQUAL TRACKING <input type="checkbox"/> YES <input type="checkbox"/> NO EQUAL PUPILS <input type="checkbox"/> YES <input type="checkbox"/> NO If Resting Nystagmus is present, please explain.	L <input type="checkbox"/> R <input type="checkbox"/>	Lack of smooth pursuit Distinct and sustained nystagmus at max deviation Angle of onset prior to 45 degrees	VERTICAL NYSTAGMUS <input type="checkbox"/> YES <input type="checkbox"/> NO
--	--	---	--

COMMENTS:

2. WALK AND TURN



☐ Cannot keep balance ☐ Starts too soon

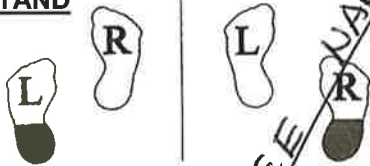
	1 st Nine Steps	2 nd Nine Steps
Stops Walking		
Miss Heel - Toe		
Steps off line		
Raises arms		
Actual # steps		

DESCRIBE TURN

CANNOT DO TEST (EXPLAIN)

COMMENTS:

3. ONE LEG STAND



SEE NARRATIVE

L	R	
		Sways while balancing
		Uses arms for balance
		Hopping
		Puts foot down

COMMENTS:

SUPPLEMENTAL TESTS

ABC'S A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

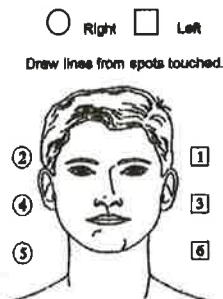
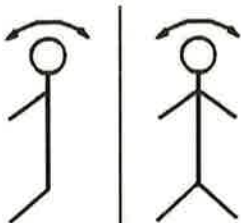
BALANCE

NOTES

FINGER DEXTERITY

NOTES

FINGER TO NOSE



WASHINGTON STATE
DUI ARREST REPORT
NARRATIVE

CASE / CITATION NUMBER

14-02534/420957647

Vehicle in Motion (Initial Observation, Observation of Stop):

Personal Contact (Observation of driver, statements, pre-exit, sobriety tests, observation of the exit, odors, general observations such as speech, attitude, clothing, etc.)

Pre-Arrest Screening (Field Sobriety Tests):

Administrative Process (BAC and Disposition):

I certify (declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct. (RCW 9A.72.085.)

OFFICER'S SIGNATURE

BADGE NUMBER

PRINTED NAME OF OFFICER

AGENCY

PLACE SIGNED (city / county / state)

DATE SIGNED

WASHINGTON STATE
DUI ARREST REPORT

CASE / CITATION NUMBER

14-02584 / 420957647

NOTE: READ THIS FORM WHEN THERE ARE EXIGENT CIRCUMSTANCES OR WHEN A SEARCH WARRANT AUTHORIZES THE BLOOD DRAW.

SPECIAL EVIDENCE WARNING

WARNING! YOU ARE UNDER ARREST FOR:

- ☐ VEHICULAR HOMICIDE
☐ UNCONSCIOUS (DUI/PHYSICAL-CONTROL/MINOR-DRIVER)
☐ FELONY DUI or FELONY PHYSICAL CONTROL
☐ VEHICULAR ASSAULT
☐ DUI ARREST RESULTING FROM AN ACCIDENT WITH SERIOUS BODILY INJURY TO ANOTHER

A TEST OF YOUR BLOOD WILL BE ADMINISTERED TO DETERMINE THE CONCENTRATION OF ALCOHOL AND/OR ANY DRUG IN YOUR BLOOD; DUE TO THE CIRCUMSTANCES OF YOUR ARREST, THIS WILL BE DONE REGARDLESS OF YOUR CONSENT; YOU HAVE THE RIGHT TO ADDITIONAL TESTS ADMINISTERED BY A QUALIFIED PERSON OF YOUR OWN CHOOSING.

On _____, I read the above warning to _____
(date) (defendant)

Officer _____ Date _____ Time _____

Name/Title of Person who extracted the blood: _____

Signature of Person who extracted the blood: _____

Date: _____ Time of Blood Draw: _____

Distribution—Original Receipt placed in case file; 1 copy (person from whom the blood was drawn or left with medical staff if person is unavailable); 1 copy (Prosecutor); 1 copy (Officer); 1 copy (person who extracted the blood).

VOLUNTARY BLOOD DRAW CONSENT FORM

I, _____, voluntarily permit officer _____ to obtain a sufficient amount of my blood to test it to determine its alcohol and/or drug content.

I understand that I have the right to refuse to give consent to a voluntary blood draw and that I may require the officer(s) to obtain a search warrant.

I understand that the blood will be extracted by a physician, a registered nurse, a licensed practical nurse, a nursing assistant, a physician assistant, a health care assistant, a first responder, an emergency medical technician, or a technician who is trained in withdrawing blood.

I realize that the blood will be tested to determine blood alcohol level and to detect the presence and/or level of marijuana, or any drug as defined by RCW 46.61.540. I understand that if the test reveals a blood alcohol level and/or the presence and/or level of marijuana, or any drug as defined by RCW 46.61.540, that the blood alcohol level and/or the presence and/or level of marijuana, or any drug, may be used as evidence against me in subsequent legal proceedings.

I understand that I have right to additional tests administered by a qualified person of my choosing.

If I wish to consult with an attorney before giving consent, reasonable efforts will be made to put me in telephonic contact with a public defender or an attorney of my choice.

My consent has been given knowingly, freely, and voluntarily, without threats of duress against my person or promise of reward.

Officer _____ Date _____ Time _____

Consenter _____ Date _____ Time _____

Name/Title of Person who extracted the blood: _____

Signature of Person who extracted the blood: _____

Date: _____ Time of Blood Draw: _____

Distribution—Original Receipt placed in case file; 1 copy (person from whom the blood was drawn or left with medical staff if person is unavailable); 1 copy (Prosecutor); 1 copy (Officer); 1 copy (person who extracted the blood).

WASHINGTON STATE PATROL
BAC DATAMASTER CDM 140074
SOFTWARE VERSION 76043-004 (04/28/04)

OCTOBER 11, 2014

SIM TEMP 34c +/- .2c: YES

OBSERVATION BEGAN: 04:10

CITATION NUMBER: 14-02534

OPERATOR'S NAME (L/F/M):
HINGTGEN/M/J

SUBJECT'S NAME (L/F/M):
BAKKER/PETER/M

SUBJECT'S DOB: 03/30/1991

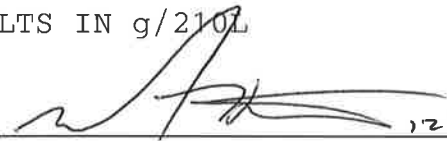
EXTERNAL STANDARD BATCH #: 14016

--- BREATH ANALYSIS ---

BLANK TEST	.000	04:29
INTERNAL STANDARD	VERIFIED	04:29
SUBJECT SAMPLE	.171	04:30
BLANK TEST	.000	04:31
EXTERNAL STANDARD	.081	04:32
BLANK TEST	.000	04:32
SUBJECT SAMPLE	.183	04:34
BLANK TEST	.000	04:35

ALL RESULTS IN g/210L

OPERATOR



126

AGENCY

LAWR STEVENS PP

LSPD
ORIGINAL

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

14-02534

TOW / IMPOUND
AND INVENTORY RECORD

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☐ IMPOUND ONLY
☒ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____
☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.
☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN

1 J 4 G Z 5 8 S 1 W C 1 4 2 1 7 2

LICENSE

AAL7174

STATE

WA

YEAR

1998

MAKE

JEEP

MODEL

JPC4

MILEAGE

☐ Report of Sale

☐ Digital

STYLE

SUV

COLOR

GRAY

DRIVER

NAME (LAST, FIRST, MI)

BAKICER PETER M.

STREET ADDRESS 1

11416 21 PL NE

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 98258

PHONE

DOB

03-30-91

REGISTERED OWNER

NAME (LAST, FIRST, MI)

BAKICER, PETER P.

STREET ADDRESS

11416 21 PL NE

CITY, STATE, ZIP CODE

LAKE STEVENS, WA 98258

PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)

SAME AS RO

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10-11-14 AT 0900 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE SPEEDWAY TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM 11416 21 PL NE LAKE STEVENS, WA

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

[Signature]

DOL TOW TRUCK NO.

534802

DATE

10-11-14

EQUIPMENT

☐ GLOVE BOX LOCKED

☒ KEYS [*1*]

☐ AUTO STEREO

☐ AUDIO TAPES / CD'S []

☐ CB RADIO

☐ RADAR DETECTOR

☐ TRUNK LOCKED

☐ SPARE TIRE

☐ JACK

☐ CHAINS

☐ OTHER _____

DAMAGE

☐ FRONT

SHADE DAMAGED AREA

☐ R FRONT

☐ R SIDE

☐ R REAR

☐ L FRONT

☐ L SIDE

☐ L REAR

☐ REAR

☐ TOP

☐ UNDERCARRIAGE

☐ OTHER _____

EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

DRIVER ARRESTED FOR DUI
AFTER COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X

[Signature]

S. NOTOMFITT

BADGE NO.

102

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

LSPD
ORIGINAL

FAX COVER SHEET

Randy W. Celori Chief of Police
2211 Grade Road
Lake Stevens WA 98258
Phone 425-334-9537 Fax 425-334-9842



TO:	SNOPAC	FAX:	
FROM:	PLANALP 102	DATE:	10-11-14
CC:		PAGES:	2
RE:	Impound		

☐ WHEN THIS BOX IS CHECKED, THE FOLLOWING IS **CONFIDENTIAL POLICE INFORMATION** AND MAY NOT BE DISSEMINATED.

[illegible]

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

**LSPD
ORIGINAL**

Case # 1402534

LAKE STEVENS POLICE EVIDENCE UNIT				Primary Officer/Badge Number <i>M. HINGTGEN #126</i>				Case Number <i>14-02534</i>			
Type of Crime: <u>Felony</u> / Misdemeanor (Circle)				Type of Case: <u>DOT COLLISION</u>				Date/Time: <u>10-11-14</u>			
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING				*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfkg will be held for 60 days or 60 days past owner notification							

Item #	Item	Brand Name				Storage Location	Disposition										
	Brand/Model/Caliber (Further Description)																
	Serial #	Where Found	Weight of Narcotic														
Action #																	
Owner's Name						Address		City		State		Zip		Phone #		Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions																	

Item #	Item	Brand Name				Storage Location	Disposition										
	Brand/Model/Caliber (Further Description)																
	Serial #	Where Found	Weight of Narcotic														
Action #																	
Owner's Name						Address		City		State		Zip		Phone #		Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions																	

Item #	Item	Brand Name				Storage Location	Disposition										
	Brand/Model/Caliber (Further Description)																
	Serial #	Where Found	Weight of Narcotic														
Action #																	
Owner's Name						Address		City		State		Zip		Phone #		Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions																	

Item #	Item	Brand Name				Storage Location	Disposition										
	Brand/Model/Caliber (Further Description)																
	Serial #	Where Found	Weight of Narcotic														
Action #																	
Owner's Name						Address		City		State		Zip		Phone #		Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions																	

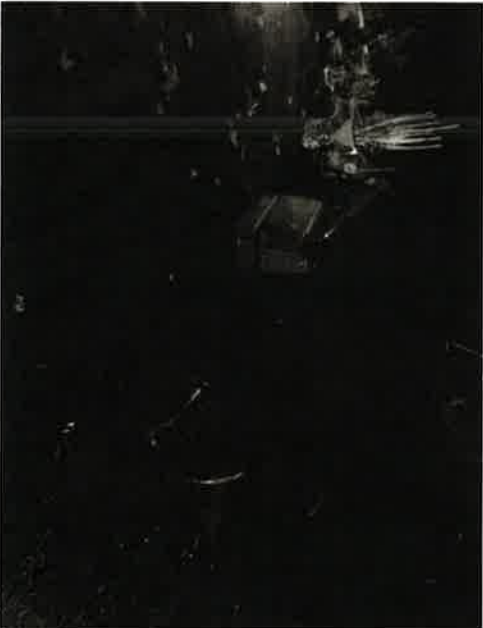
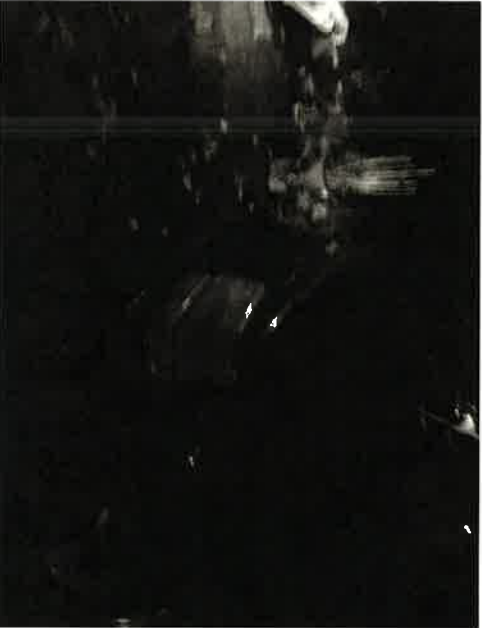
Item #	Item	Brand Name				Storage Location	Disposition										
	Brand/Model/Caliber (Further Description)																
	Serial #	Where Found	Weight of Narcotic														
Action #																	
Owner's Name						Address		City		State		Zip		Phone #		Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions																	

Evidence Control Use Only:																	
Received by Evidence:				NCIC/WACIC <input checked="" type="checkbox"/> Date:				CAD/RMS Checked				ROUTING:					
Name: _____ # _____				NCIC/WACIC + Date:				Owner Letter Sent:				White: Property Room					
Date: _____ Time: _____				NCIC/WACIC - Date:				Owner Letter Sent:				Yellow: Case File					

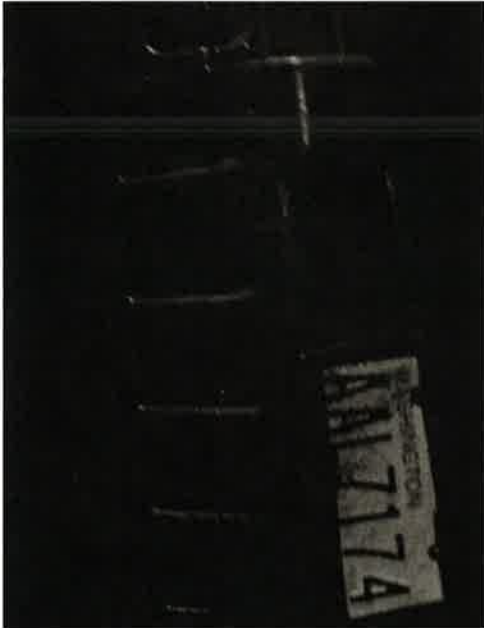
ORIGINAL



ORIGINAL



ORIGINAL



ORIGINAL



Incident History for: #SS14020140

Case Numbers: \$SS14002534

Received 10/11/14 03:26:40 BY SPCT07 SP0323
Entered 10/11/14 03:27:59 BY SPCT07 SP0323
Dispatched 10/11/14 03:28:22 BY SPSC40 SP0345
Enroute 10/11/14 03:28:22
Onscene 10/11/14 03:29:12
Closed 10/11/14 04:46:59

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS001 Fire BLK: AG1619 Map Page: 377G-6 Group: SS1 Beat: NORT

Src: 9

Loc: 10928 LAKEVIEW DR ,LKS btwn 20 ST NE & 114 AV NE (V)

Latitude: (+) 47.999364 Longitude: (-) 122.104733

Loc Info:

Name: WEAVER, DAVID

Addr:

Phone: 4252939727

/0327 (SP0323) ENTRY ,CC, 3 AGO, H/R, DRK JEEP CHEROKEE VS POLE, LEFT
BUMPER AND LIC/ AAL7174 AT LOC , LSH EB ON 20TH
/0326? SUPP NAM: WEAVER, DAVID
/0328 (SP0345) DISPER 19N2 #SS126 HINGTGEN, OFFICER (MICHAEL)
/0328 (*****) REMINQ 19N2 AAL7174
/0328 (SP0345) REMINQ 19N2 LIC, 19N2, AAL7174, , ,
/0328 ASSTER 19S12 [AC]
#SS79 SUMMERS, SGT (ROBERT)
/0329 ONSCNE 19N2
/0330 (SS79) *ONSCNE 19S12
/0330 (SP0345) CHGLOC 19S12 [11416 21 PL]
/0330 MISC 19N2 ,POLE #27
/0330 MISC 19N2 ,POLE NEEDS TO BE REPLACED
/0331 (SS79) *ONSCNE 19S12
/0333 (SP0360) MISC 19N2 ,PUD ADVISED
/0335 ASSTER 19N1 [10928 LAKEVIEW DR ,LKS]
#SS102 PLANALP, OFFICER (DANIEL)
/0340 CHGLOC 19N1 [11416 21 PL NE]
/0341 CHGLOC 19N2 [11416 21 PL NE]
/0341 ONSCNE 19N2
/0343 (*****) REMINQ 19S12 BAKKER. PETER. P. 03301991. .
/0343 (SP0360) REMINQ 19S12 NAME, 19S12, BAKKER, PETER, P, 03301991, ,
/0344 (SS102) *ONSCNE 19N1
/0344 (*****) REMINQ 19S12 BAKER. PETER. . 03301991. .
/0344 (SP0360) REMINQ 19S12 NAME, 19S12, BAKER, PETER, , 03301991, ,
/0345 (*****) REMINQ 19S12 BAKER. PETER. M. 03301991. .
/0345 (SP0360) REMINQ 19S12 NAME, 19S12, BAKER, PETER, M, 03301991, ,
/0345 (*****) REMINQ 19S12 BAKKER. PETER. M. 03301991. .
/0345 (SP0360) REMINQ 19S12 NAME, 19S12, BAKKER, PETER, M, 03301991, ,
/0356 MISC 19N1 , 1 10-15 DUI
/0401 ROTREQ 19N1 TOW 5099 LKS MACK'S TOWING
3605683131
/0403 MISC 19N1 , MACKS DOES NOT HAVE FLAT BED
/0403 MISC 19N1 , FLAT BED FOR JEEP FRONT END DAMAGE
/0403 ROTREQ 19N1 TOW 5348 LKS SPEEDWAY TOWING INC
3605635630
/0404 TRANS 19N2 [PD]
/0405 MISC 19N1 , SPEEDWAY TOW ER W/FLAT BED
/0407 TRANSC 19N2
/0409 ASNCAS 19N1 \$SS14002534
/0413 \$PREMPT 19S12

LSPD
ORIGINAL

/0422	ASSTOS	19S12	[PD]
			#SS79 SUMMERS, SGT (ROBERT)
/0422	ONSCNE	19S12	[11416 21 PL NE]
/0430	MISC	19N1	, TOW OS
/0441	TRANS	19N2	[11416 21 PL NE]
/0444	TRANSC	19N2	
/0446	CLEAR	19N2	D/H
/0446	CLEAR	19N1	D/H
/0446	CLEAR	19S12	D/H
/0446	CLOSE	19S12	
/0509	(SP0318) SUPP		TXT: IMPOUND TIME 0508

*** FAX TX REPORT ***

TRANSMISSION OK

JOB NO.	2534
DESTINATION ADDRESS	913605707026
SUBADDRESS	
DESTINATION ID	DOL-DUI
ST. TIME	10/12 01:15
TX/RX TIME	05' 18
PGS.	9
RESULT	OK

LAKE STEVENS POLICE DEPARTMENT

FAX COVER SHEET

Randy W. Celori Chief of Police

2211 Grade Road

Lake Stevens WA 98258

Phone 425-334-9537 Fax 425-334-9842



TO:	DOL -	FAX:	360 570-7026
FROM:	LSPD	DATE:	10-12-14
CC:		PAGES:	8
RE:	11-02534		

☐

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DUI ARREST RPT